# 14000157002

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
	WAIT	, MAIL
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SEGRETARY OF STATE

B. BOSTICK 0CT **1 6 2014** EXAMINER

### **COVER LETTER**

TO: Registration Section \*
Division of Corporations

SUBJECT: Anel Transportation LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Name of Person			
	Anel Transportation LLC			
	Firm/Company	_		
	3138 Regal Darner Drive			
	Address	<u></u>		
	Kissimmee Florida 34744	4	_1=	
	City/State and Zip Code	THE SEC	<u> </u>	-97
ć	aneltransportation@gmail.com	<u> </u>	8	
For further information conc	E-mail address: (to be used for future annual report notification) erning this matter, please call:	TARY O	M OCT ILL P	m
Aura Perez-F	Rivera 407 572-5552	FLOI	ں بپ	0
Name of Pe		ber 55 m	5	

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status

□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

#### **MAILING ADDRESS:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Anel Transportation LLC		
(Name of the Limited Liabi (A Florid	lity Company as it now appears on da Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Florida document number L14000157002	Company were filed on Octo	per 8, 2014 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the words "L	imited Liability Company," the desig	nation "LLC" or the abla riation "L.L.C."
Enter new principal offices address, if applicable:		2 R 00
(Principal office address MUST BE A STREET ADD	RESS)	TAP TAS
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		GF STATE FLORIDA
B. If amending the registered agent and/or registered agent and/or the new registered office add		records, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida st	and allinos
	Enter Florida st	reei aaaress
		, Florida
	City	Zip Code

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member **Address** Type of Action <u>Title</u> **Name** 3138 Regal Darner Drive **Nelson Rivera MGR** □ Add Kissimmee FI, 34744 Remove 3138 Regal Darner Dr. Aura Perez-Rivera MGR Add 🖪 Kissimmee FI, 34744 ☐ Remove Nelson Rivera 3138 Regal Darner Dr **AMBR** Add Kissimmee FI, 34744 ☐ Remove ☐ Remove □ Add

ii ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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-	
-	
_	
The effe	ve date, if other than the date of filing:
Dated	October 10th 2014
Daicu	Cema Perg-Lines
	Signature of a member or authorized representative of a member
	Aura Perez-Rivera
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SEGRETARY OF STATE